



# MASSACHUSETTS STATE POLICE

## FIRE AND EXPLOSION INVESTIGATION SECTION

NOTIFICATION \_\_\_/\_\_\_/\_\_\_ TIME:\_\_\_\_\_ NOTIFIED BY:\_\_\_\_\_

DATE OF FIRE:\_\_\_\_\_ TIME:\_\_\_\_\_ ADDRESS:\_\_\_\_\_

CITY:\_\_\_\_\_ BLDG FACES:\_\_\_\_\_ # ALARMS \_\_\_\_\_

# OF FLOORS \_\_\_\_\_ ROOF TYPE \_\_\_\_\_ COVERING:\_\_\_\_\_

SIDING \_\_\_\_\_ FOUNDATION:\_\_\_\_\_ BLDG CONST:\_\_\_\_\_

TYPE OF DWELLING \_\_\_\_\_ LOCATION OF ELECTRIC SERVICE \_\_\_\_\_

ON SCENE WITH:\_\_\_\_\_

FD OIC \_\_\_\_\_ FIRE CHIEF:\_\_\_\_\_

WEATHER:\_\_\_\_\_ APPROX TEMP:\_\_\_\_\_

### EXTERIOR EXAMINATION:

A-SIDE (FRONT):\_\_\_\_\_

B-SIDE (LEFT):\_\_\_\_\_

C-SIDE (REAR):\_\_\_\_\_

D-SIDE (RIGHT):\_\_\_\_\_

### INTERIOR EXAMINATION:

HEATING SYSTEM:\_\_\_\_\_ LOC:\_\_\_\_\_

OIL TANK(S):\_\_\_\_\_ EMPTY FULL \_\_\_\_\_

HOT WATER:\_\_\_\_\_ LOC:\_\_\_\_\_

ELEC SERVICE:\_\_\_\_\_ LOCATION:\_\_\_\_\_

NAT GAS/METER LOC:\_\_\_\_\_

STOVE:\_\_\_\_\_ FIREPLACE: YES/NO LOC:\_\_\_\_\_

HEAT/SMOKE DET Y N \_\_\_\_\_ OPERATIONAL Y N \_\_\_\_\_ LOC:\_\_\_\_\_

AREA/POINT OF ORIGIN:\_\_\_\_\_

IGNITION SOURCE:\_\_\_\_\_ MATERIAL IGNITED:\_\_\_\_\_

PHOTOS BY:\_\_\_\_\_ FD CASE# \_\_\_\_\_ MSP CASE# \_\_\_\_\_



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OWNERS NAME: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_/ SS# \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ PHONE #: \_\_\_\_\_

HOME OWNERS INSUR: \_\_\_\_\_ AGENT: \_\_\_\_\_

MORTGAGE AMOUNT: \_\_\_\_\_ BANK: \_\_\_\_\_

TENANTS OR NAME OF BUSINESS:

1. \_\_\_\_\_ INSURANCE: \_\_\_\_\_

2. \_\_\_\_\_ INSURANCE: \_\_\_\_\_

3. \_\_\_\_\_ INSURANCE: \_\_\_\_\_